assender complete this section cument (	SCOMPLETE THIS SECTION ON DELIVER Page 1 of
<ul> <li>Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.</li> <li>Print your name and address on the reverse so that we can return the card to you.</li> <li>Attach this card to the back of the mailpiece, or on the front if space permits.</li> </ul>	A. Signature  X
Article Addressed to:	D. Is delivery address different from item 1? '☐ Yes If YES, enter delivery address below: ☐ No
DARIN KEITH MARTIN 03606-061	
FCI MCKEAN	3. Service Type
P.O. BOX 8000 BRADFORD, PA 16701	☐ Registered ☐ Return Receipt for Merchandise ☐ C.O.D.
	4. Restricted Delivery? (Extra Fee) Yes
Article Number     (Transfer from service label)	2 0860 0000 140
PS Form 3811, August 2001 Domestic Re	eturn Beceipt 102595-02-M-0835